

PERSONAL FINANCIAL STATEMENT

FORM PFS
COVER SHEET
PAGE 1

Filed in accordance with chapter 572 of the Government Code.
For filings required in 2026, covering calendar year ending December 31, 2025.
Use FORM PFS--INSTRUCTION GUIDE when completing this form.

PAGE #
15

ACCOUNT #
[REDACTED]

OFFICE USE ONLY

Date Received

Receipt #

HD / PM

Amount

Date Processed

Date Imaged

1 NAME

TITLE; FIRST; MI

The Honorable Meredith

NICKNAME; LAST; SUFFIX

Chacon

2 ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP

214 Dwyer Ave

Suite 300

San Antonio, TX 78204

☐ (CHECK IF FILER'S HOME ADDRESS)

3 TELEPHONE
NUMBER

AREA CODE PHONE NUMBER; EXTENSION

[REDACTED]

4 REASON
FOR FILING
STATEMENT

- ☒ CANDIDATE Bexar County District Attorney (INDICATE OFFICE)
- ☐ ELECTED OFFICER _____ (INDICATE OFFICE)
- ☐ APPOINTED OFFICER _____ (INDICATE AGENCY)
- ☐ EXECUTIVE HEAD _____ (INDICATE AGENCY)
- ☐ FORMER OR RETIRED JUDGE SITTING BY ASSIGNMENT
- ☐ STATE PARTY CHAIR _____ (INDICATE PARTY)
- ☐ OTHER _____ (INDICATE POSITION)

5 Family members whose financial activity you are reporting (see instructions).

SPOUSE

[REDACTED]

DEPENDENT CHILD

1.

[REDACTED]

2.

3.

In Parts 1 through 18, you will disclose your financial activity during the preceding calendar year. In Parts 1 through 14, you are required to disclose not only your own financial activity, but also that of your spouse or a dependent child (see instructions).

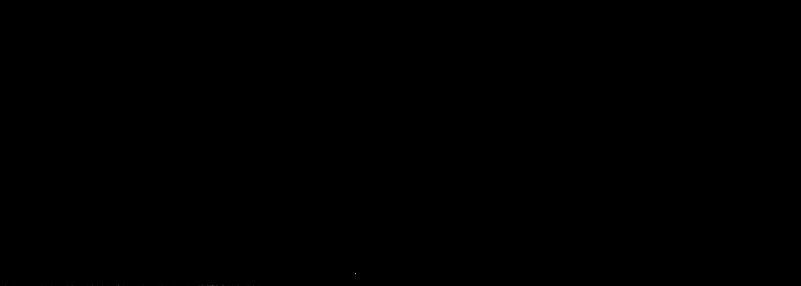
SOURCES OF OCCUPATIONAL INCOME

PART 1A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 FILER INFORMATION	FILER NAME Chacon, Meredith (The Honorable)	FILER ID 
2 INFORMATION RELATES TO	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD ____	
3 EMPLOYMENT ☐ EMPLOYED BY ANOTHER	NAME AND ADDRESS OF EMPLOYER / POSITION HELD ☐ (Check if Filer's Home Address) EMPLOYER SELF ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 214 Dwyer Ave Suite 300 San Antonio, TX 78204 POSITION HELD	
☒ SELF-EMPLOYED	NATURE OF OCCUPATION Attorney	

INFORMATION RELATES TO	☐ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____	
EMPLOYMENT ☒ EMPLOYED BY ANOTHER	NAME AND ADDRESS OF EMPLOYER / POSITION HELD ☐ (Check if Filer's Home Address)  ZIP CODE	
☐ SELF-EMPLOYED	NATURE OF OCCUPATION	

STOCK

PART 2

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and **DO NOT** include this page in the report.

List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 FILER INFORMATION	FILER NAME Chacon, Meredith (The Honorable)	FILER ID [REDACTED]
2 BUSINESS ENTITY	NAME XRP	
3 STOCK HELD OR ACQUIRED BY	☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD _____	
4 NUMBER OF SHARES	☐ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☒ LESS THAN 10K ☐ 10,000 OR MORE	
5 IF SOLD	☐ NET GAIN ☐ NET LOSS	

BUSINESS ENTITY	NAME XRP	
STOCK HELD OR ACQUIRED BY	☐ FILER ☐ SPOUSE ☒ DEPENDENT CHILD <u>1</u>	
NUMBER OF SHARES	☐ LESS THAN 100 ☐ 100 TO 499 ☒ 500 TO 999 ☐ 1,000 TO 4,999 ☐ LESS THAN 10K ☐ 10,000 OR MORE	
IF SOLD	☐ NET GAIN ☐ NET LOSS	

PERSONAL NOTES AND LEASE AGREEMENTS

PART 6

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of more than \$2,220 in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 FILER INFORMATION	FILER NAME Chacon, Meredith (The Honorable)	FILER ID [REDACTED]
2 PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	USAA	
3 LIABILITY OF	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____	
4 GUARANTOR	NONE	
5 AMOUNT	Less than \$11,120	
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	USAA FEDERAL SAVINGS BANK (CREDIT CARD)	
LIABILITY OF	☐ FILER ☒ SPOUSE ☐ DEPENDENT CHILD _____	
GUARANTOR	NONE	
AMOUNT	Less than \$11,120	
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Apple Card / Goldman Sachs	
LIABILITY OF	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____	
GUARANTOR	NONE	
AMOUNT	Less than \$11,120	

PERSONAL NOTES AND LEASE AGREEMENTS

PART 6

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of more than \$2,220 in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 FILER INFORMATION	FILER NAME Chacon, Meredith (The Honorable)	FILER ID [REDACTED]
2 PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Apple Card / Goldman Sachs	
3 LIABILITY OF	☐ FILER ☒ SPOUSE ☐ DEPENDENT CHILD _____	
4 GUARANTOR	NONE	
5 AMOUNT	Less than \$11,120	
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Bank of America (Visa)	
LIABILITY OF	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____	
GUARANTOR	NONE	
AMOUNT	Less than \$11,120	
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Bank of America (Visa)	
LIABILITY OF	☐ FILER ☒ SPOUSE ☐ DEPENDENT CHILD _____	
GUARANTOR	NONE	
AMOUNT	Less than \$11,120	

PERSONAL NOTES AND LEASE AGREEMENTS

PART 6

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of more than \$2,220 in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 FILER INFORMATION	FILER NAME Chacon, Meredith (The Honorable)	FILER ID [REDACTED]
2 PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	CitiBank Credit Card	
3 LIABILITY OF	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____	
4 GUARANTOR	NONE	
5 AMOUNT	Less than \$11,120	
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Chase Bank - Visa	
LIABILITY OF	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____	
GUARANTOR	NONE	
AMOUNT	Less than \$11,120	
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	CareCredit/ Synchrony Bank	
LIABILITY OF	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____	
GUARANTOR	NONE	
AMOUNT	Less than \$11,120	

PERSONAL NOTES AND LEASE AGREEMENTS

PART 6

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and **DO NOT** include this page in the report.

Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of more than \$2,220 in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 FILER INFORMATION	FILER NAME Chacon, Meredith (The Honorable)	FILER ID [REDACTED]
2 PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Direct Loans	
3 LIABILITY OF	☐ FILER ☒ SPOUSE ☐ DEPENDENT CHILD _____	
4 GUARANTOR	NONE	
5 AMOUNT	Less than \$11,120	
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Lexus Financial Services (Car Note)	
LIABILITY OF	☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD _____	
GUARANTOR	NONE	
AMOUNT	At least \$22,240 but less than \$55,610	
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Lexus Financial Services (Car Note)	
LIABILITY OF	☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD _____	
GUARANTOR	NONE	
AMOUNT	At least \$22,240 but less than \$55,610	

PERSONAL NOTES AND LEASE AGREEMENTS

PART 6

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of more than \$2,220 in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 FILER INFORMATION	FILER NAME Chacon, Meredith (The Honorable)	FILER ID [REDACTED]
2 PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Rocket Mortgage (Home Mortgage)	
3 LIABILITY OF	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____	
4 GUARANTOR	NONE	
5 AMOUNT	At least \$55,610 or more	

INTERESTS IN REAL PROPERTY

PART 7A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS-INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 FILER INFORMATION	FILER NAME Chacon, Meredith (The Honorable)	FILER ID [REDACTED]
2 HELD OR ACQUIRED BY	☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD _____	
3 STREET ADDRESS ☐ NOT AVAILABLE ☐ CHECK IF FILER'S HOME ADDRESS	[REDACTED] STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE	
4 DESCRIPTION ☒ LOTS ☐ ACRES	[REDACTED] NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED	
5 NAMES OF PERSONS RETAINING AN INTEREST ☒ NOT APPLICABLE (SEVERED MINERAL INTEREST)		
6 IF SOLD ☐ NET GAIN ☐ NET LOSS		

INTEREST IN BUSINESS ENTITIES

PART 7B

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS-INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 FILER INFORMATION	FILER NAME Chacon, Meredith (The Honorable)	FILER ID [REDACTED]
2 HELD OR ACQUIRED BY	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____	
3 DESCRIPTION	NAME AND ADDRESS ☐ (Check if Filer's Home Address) CHACON, CAMPBELL & ALEXANDER, PLLC 214 DWYER AVE SUITE 300 SAN ANTONIO, TX 78204	
4 IF SOLD ☐ NET GAIN ☐ NET LOSS		
HELD OR ACQUIRED BY	☐ FILER ☒ SPOUSE ☐ DEPENDENT CHILD _____	
DESCRIPTION	NAME AND ADDRESS ☐ (Check if Filer's Home Address) REYIFY CONSULTING 214 DWYER AVE SUITE 300 SAN ANTONIO, TX 78204	
IF SOLD ☐ NET GAIN ☐ NET LOSS		

OWNERSHIP OF BUSINESS ASSOCIATIONS

PART 11A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 5 percent or more of the outstanding ownership. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 FILER INFORMATION	FILER NAME Chacon, Meredith (The Honorable)	FILER ID [REDACTED]
2 BUSINESS ASSOCIATION	NAME AND ADDRESS ☐ (Check If Filer's Home Address) CHACON, CAMPBELL & ALEXANDER, PLLC 214 DWYER AVE SUITE 300 SAN ANTONIO, TX 78204	
3 BUSINESS TYPE	☐ Corporation ☐ Limited Partnership ☐ Profesional Association ☐ Firm ☐ Limited Liability Partnership ☐ Joint Venture ☒ Partnership ☐ Professional Corporation ☐ Other	
4 HELD, ACQUIRED, OR SOLD BY	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____	

BUSINESS ASSOCIATION	NAME AND ADDRESS ☐ (Check If Filer's Home Address) REYIFY CONSULTING 214 DWYER AVE SUITE 300 SAN ANTONIO, TX 78204	
BUSINESS TYPE	☐ Corporation ☐ Limited Partnership ☐ Profesional Association ☐ Firm ☐ Limited Liability Partnership ☐ Joint Venture ☐ Partnership ☐ Professional Corporation ☒ Other	
HELD, ACQUIRED, OR SOLD BY	☐ FILER ☒ SPOUSE ☐ DEPENDENT CHILD _____	

ASSETS OF BUSINESS ASSOCIATIONS

PART 11B

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all assets of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS-INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 FILER INFORMATION	FILER NAME Chacon, Meredith (The Honorable)	FILER ID [REDACTED]																
2 BUSINESS ASSOCIATION	NAME AND ADDRESS ☐ (Check if Filer's Home Address) CHACON, CAMPBELL & ALEXANDER, PLLC 214 DWYER AVE SUITE 300 SAN ANTONIO, TX 78204																	
3 BUSINESS TYPE	Partnership																	
4 HELD, ACQUIRED, OR SOLD BY	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____																	
5 ASSETS	<table border="1"><thead><tr><th>DESCRIPTION</th><th>CATEGORY</th></tr></thead><tbody><tr><td>1/3 OF ALL FURNITURE AND EQUIPMENT</td><td>Less than \$11,120</td></tr><tr><td> </td><td> </td></tr><tr><td> </td><td> </td></tr><tr><td> </td><td> </td></tr><tr><td> </td><td> </td></tr><tr><td> </td><td> </td></tr><tr><td> </td><td> </td></tr></tbody></table>		DESCRIPTION	CATEGORY	1/3 OF ALL FURNITURE AND EQUIPMENT	Less than \$11,120												
DESCRIPTION	CATEGORY																	
1/3 OF ALL FURNITURE AND EQUIPMENT	Less than \$11,120																	

BOARDS AND EXECUTIVE POSITIONS

PART 12

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS-INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 FILER INFORMATION	FILER NAME Chacon, Meredith (The Honorable)	FILER ID [REDACTED]
2 ORGANIZATION	METHODIST CHILDREN'S HOME	
3 POSITION HELD	BOARD MEMBER	
4 POSITION HELD BY	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____	
ORGANIZATION	METHODIST HEALTHCARE MINISTRIES	
POSITION HELD	BOARD MEMBER	
POSITION HELD BY	☐ FILER ☒ SPOUSE ☐ DEPENDENT CHILD _____	

PERSONAL FINANCIAL STATEMENT

PARTS MARKED "NOT APPLICABLE" BY FILER

FORM PFS
COVER SHEET
PAGE 2

On this page, indicate any Parts of Form PFS that are not applicable to you. If you do not place a check in a box, then pages for that Part must be included in the report. *If you place a check in a box, do NOT include pages for that Part in the report.*

6 PARTS NOT APPLICABLE TO FILER

- ☐ N/A Part 1A - Sources of Occupational Income
- ☒ N/A Part 1B - Retainers
- ☐ N/A Part 2 - Stock
- ☒ N/A Part 3 - Bonds, Notes & Other Commercial Paper
- ☒ N/A Part 4 - Mutual Funds
- ☒ N/A Part 5 - Income from Interest, Dividends, Royalties & Rents
- ☐ N/A Part 6 - Personal Notes and Lease Agreements
- ☐ N/A Part 7A - Interests in Real Property
- ☐ N/A Part 7B - Interests in Business Entities
- ☒ N/A Part 8 - Gifts
- ☒ N/A Part 9 - Trust Income
- ☒ N/A Part 10A - Blind Trusts
- ☒ N/A Part 10B - Trustee Statement
- ☐ N/A Part 11A - Business Associations
- ☐ N/A Part 11B - Assets of Business Associations
- ☒ N/A Part 11C - Liabilities of Business Associations
- ☐ N/A Part 12 - Boards and Executive Positions
- ☒ N/A Part 13 - Expenses Accepted Under Honorarium Exception
- ☒ N/A Part 14 - Interest in Business in Common with Lobbyist
- ☒ N/A Part 15 - Fees Received for Services Rendered to a Lobbyist or Lobbyist's Employer
- ☒ N/A Part 16 - Representation by Legislator Before State Agency
- ☒ N/A Part 17 - Benefits Derived from Functions Honoring Public Servant
- ☒ N/A Part 18 - Legislative Continuances
- ☒ N/A Part 19 - Contracts with Governmental Entity
- ☒ N/A Part 20 - Bond Counsel Services Provided by a Legislator

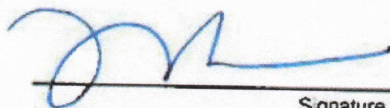
PERSONAL FINANCIAL STATEMENT AFFIDAVIT

The law requires the personal financial statement to be verified. Without proper verification, the statement is not considered filed.

The verification page on a personal statement filed electronically with the Texas Ethics Commission must have the electronic signature of the individual required to file the personal financial statement.

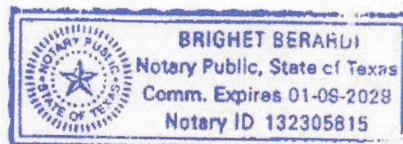
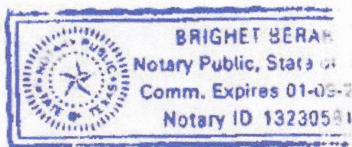
The verification page on a personal financial statement filed with an authority other than the Texas Ethics Commission must have the signature of the individual required to file the personal financial statement as well as the signature and stamp or seal of office of a notary public or other person authorized by law to administer oaths and affirmations.

I swear, or affirm, under penalty of perjury, that this financial statement covers calendar year ending December 31, 2025, and is true and correct and includes all information required to be reported by me under chapter 572 of the Government Code.

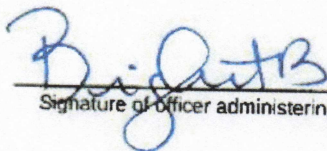


Signature of Filer

AFFIX NOTARY STAMP / SEAL ABOVE



Sworn to and subscribed before me, by the said Meredith Chacon, this the 11th day of February, 2026, to certify which, witness my hand and seal of office.



Signature of officer administering oath

Brighet Berardi

Printed name of officer administering oath

Notary

Title of officer administering oath